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# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$1,630.00

## Complete if Known

Application Number	10/016,051
Filing Date	12/06/2001
First Named Inventor	Yoshitaka MISHIMA
Examiner Name	Michael G. BOGART
Art Unit	3761
Attorney Docket No.	121027-0086

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit card	<b>3. ADDITIONAL FEES</b>	
<input checked="" type="checkbox"/> Deposit Account	<input type="checkbox"/> Money Order	Large Entity   Small Entity	
<input type="checkbox"/> Other	<input type="checkbox"/> None		
Deposit Account Number: 12-2136			
Deposit Account Name: BUTZEL LONG			
The Director is authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below			
<input type="checkbox"/> Credit any overpayments			
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application			
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			
<b>FEE CALCULATION</b>			
<b>1. BASIC FILING FEE</b>			
Large Entity   Small Entity			
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			
<b>2. EXTRA CLAIM FEES FOR UTILITY AND</b>			
Total Claims: 20** = 0 X = 0.00			
Independent Claims: 3** = 0 X = 0.00			
Multiple Dependent: =			
Large Entity   Small Entity			
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 84	2201 42	Independent claims in excess of 3	
1203 260	2203 140	Multiple dependent claim, if not paid	
1204 84	2204 42	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)		\$0.00	
*or number previously paid, if greater; For Reissues, see above			
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$)		\$1,630.00	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Michael S. Czybowski	Registration No. (Attorney/Agent)	32,816
Signature	<i>Michael S. Czybowski</i>	Telephone	734.995.3110
		Date	December 16, 2003

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**TRANSMITTAL LETTER**  
**(General - Patent Pending)**

Docket No.  
121027-0086

In Re Application Of:  
Yoshitaka MISHIMA

Serial No.  
10/016,051

Filing Date  
12/06/2001

Examiner  
Michael G. BOGART

Group Art Unit  
3761

Title:

**DISPOSABLE DIAPER WITH SKIN-CONTACTABLE SHEETS SPACED ABOVE  
SKIN-CONTACTABLE SURFACE**

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is:

**PART B - FEE(S) TRANSMITTAL  
ISSUE FEE TRANSMITTAL  
FEE TRANSMITTAL**

in the above identified application.

- ☐ No additional fee is required.
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- ☒ The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 12-2136 as described below. A duplicate copy of this sheet is enclosed.
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Dated: December 16, 2003

  
\_\_\_\_\_  
Signature  
Michael S. Gzybowski

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Signature of Person Mailing Correspondence

Marilynn M. Peterson

\_\_\_\_\_  
Typed or Printed Name of Person Mailing Correspondence

CC:

**CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)**

Applicant(s): Yoshitaka MISHIMA

Docket No.

121027-0086

Serial No.

10/016,051

Filing Date

12/06/2001

Examiner

Michael G. BOGART

Group Art Unit

3761

Invention:

DISPOSABLE DIAPER WITH SKIN-CONTACTABLE SHEETS SPACED ABOVE SKIN-CONTACTABLE SURFACE

I hereby certify that this TRANSMITTAL OF PAYMENT OF ISSUE FEE

(Identify type of correspondence)

is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on December 16, 2003

(Date)

Marilynn M. Peterson

(Typed or Printed Name of Person Mailing Correspondence)

A handwritten signature in cursive script that reads "Marilynn M. Peterson".

(Signature of Person Mailing Correspondence)

Note: Each paper must have its own certificate of mailing.

**TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)**  
**(37 C.F.R. 1.311)**

Docket No.  
**121027-0086**

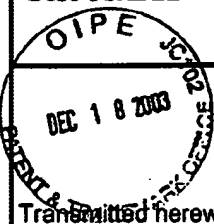
Applicant(s):

**Yoshitaka MISHIMA**

Serial No.	Filing Date	Examiner	Group Art Unit	Confirmation No.
10/016,051	12/06/2001	Michael G. BOGART	3761	6019

Invention:

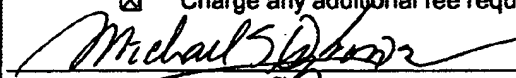
**DISPOSABLE DIAPER WITH SKIN-CONTACTABLE SHEETS SPACED ABOVE SKIN-CONTACTABLE SURFACE**



**Mail Stop Issue Fee**  
**TO THE COMMISSIONER FOR PATENTS**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

Transmitted herewith are the following for the above-identified application.

- ☐ Issue Fee Transmittal Form PTOL-85
- ☒ Utility Fee: \$ 1330.00    ☐ Design Fee: \_\_\_\_\_    ☐ Plant Fee: \_\_\_\_\_
- ☒ Publication Fee: \$ 300.00
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- ☒ The Director is hereby authorized to charge and credit Deposit Account No. \_\_\_\_\_ as described below.
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- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.

  
\_\_\_\_\_  
Signature  
**Michael S. Gzybowski**


Dated: **December 16, 2003**

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Signature of Person Mailing Correspondence	
<b>Marilynn M. Peterson</b>	
Typed or Printed Name of Person Mailing Correspondence	